

# TRANSMITTAL FORM

Application Serial Number	10/660,444
Filing Date	September 11, 2003
First Named Inventor	Chanduszko et al.
Group Art Unit	3731
Examiner Name	Not yet assigned
Attorney Docket No.	NMT-015
Patent No.	Not applicable
Issue Date	Not applicable

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Request For Continued Examination (RCE) Transmittal <input checked="" type="checkbox"/> Power of Attorney by Assignee of Entire Interest Revocation of Prior Powers and New Power of Attorney (1 pg.) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> CD(s) for large table or computer program <input type="checkbox"/> Amendment After Allowance <input type="checkbox"/> Request for Certificate of Correction <input type="checkbox"/> Certificate of Correction (in duplicate)	<input type="checkbox"/> Notice of Appeal to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Brief (in triplicate) <input type="checkbox"/> Status Inquiry <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Certificate of Facsimile Transmission under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Amendment/Response <input type="checkbox"/> Preliminary <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____]		
<input type="checkbox"/> Petition for Extension of Time		
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<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Sequence Listing submission <input type="checkbox"/> Paper Copy/CD <input type="checkbox"/> Computer Readable Copy <input type="checkbox"/> Statement verifying identity of above		


## CORRESPONDENCE ADDRESS

Direct all correspondence to: Patent Administrator  
Kirkpatrick & Lockhart Nicholson  
Graham LLP  
75 State Street  
Boston, MA 02109-1808  
Tel. No.: (617) 261-3100  
Fax No.: (617) 261-3175

## SIGNATURE BLOCK

Date: August 25, 2005  
Reg. No. 51,752  
Tel. No.: (617) 261-3285  
Fax No.: (617) 261-3175

Respectfully submitted,

  
Jennifer G. Moitoso  
Attorney for Applicant  
Kirkpatrick & Lockhart Nicholson  
Graham LLP  
75 State Street  
Boston, MA 02109-1808



PATENT  
Attorney Docket No. NMT-015

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTORS: Chanduszko et al. ASSIGNEE: NMT Medical, Inc.  
SERIAL NO.: 10/660,444 FILING DATE: September 11, 2003

TITLE: SEPTAL PUNCTURE DEVICE

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**POWER OF ATTORNEY BY ASSIGNEE OF ENTIRE INTEREST**  
**REVOCATION OF PRIOR POWERS AND NEW POWER OF ATTORNEY**

Sir:

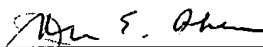
As an authorized representative of the assignee of record of the entire right, title, and interest in the above-identified patent application, I hereby revoke all powers of attorney previously given and hereby appoint the registered patent practitioners associated with **Customer Number 022832** to prosecute and transact all business in the U.S. Patent and Trademark Office connected therewith.

Please direct all correspondence for the above-identified patent application to the address associated with the above Customer Number.

The assignee of record of the entire right, title, and interest in the above-identified patent application is NMT Medical, Inc. by virtue of an assignment on October 9, 2003, from inventors Chanduszko, Callaghan, and Widomski, to NMT Medical, Inc., recorded in the United States Patent and Trademark Office on November 12, 2003, at Reel No. 014693, Frame No. 0272.

Respectfully submitted,

Dated: 3/18/05

  
\_\_\_\_\_  
John E. Ahern  
Chief Executive Officer  
NMT Medical, Inc.  
27 Wormwood Street  
Boston, Massachusetts 02210



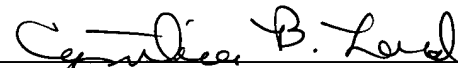
PATENT  
Attorney Docket No. NMT-015

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Chanduszek et al  
SERIAL NO.: 10/660,444 GROUP NO.: 3731  
FILING DATE: September 11, 2003 EXAMINER: Not yet assigned  
TITLE: SEPTAL PUNCTURE DEVICE

**CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8**

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 25th day of August, 2005.

  
Cynthia B. Lord

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Submitted herewith is/are:

1. Transmittal Form (1 pg.);
2. Power of Attorney by Assignee of Entire Interest Revocation of Prior Powers and New Power of Attorney (1 pg); and
3. Return Receipt Postcard.